

Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)
Fredericks Alice

1. Office, Agency, or Court

Agency Name

Town of Tiburon

Division, Board, Department, District, if applicable

Your Position

Council Member

► If filing for multiple positions, list below or on an attachment.

Agency: See Attachment

Position:

RECEIVED
MAR 20 2013
TOWN CLERK
TOWN OF TIBURON

2. Jurisdiction of Office (Check at least one box)

☐ State

☐ Judge or Court Commissioner (Statewide Jurisdiction)

☐ Multi-County _____

☐ County of _____

☒ City of Tiburon

☐ Other _____

3. Type of Statement (Check at least one box)

☒ Annual: The period covered is January 1, 2012, through December 31, 2012.

☐ Leaving Office: Date Left ____/____/____
(Check one)

-or-

The period covered is ____/____/____, through December 31, 2012.

☐ The period covered is January 1, 2012, through the date of leaving office.

☐ Assuming Office: Date assumed ____/____/____

☐ The period covered is ____/____/____, through the date of leaving office.

☐ Candidate: Election year _____ and office sought, if different than Part 1: _____

4. Schedule Summary

Check applicable schedules or "None."

► Total number of pages including this cover page: 12

☒ Schedule A-1 - Investments - schedule attached

☒ Schedule C - Income, Loans, & Business Positions - schedule attached

☐ Schedule A-2 - Investments - schedule attached

☒ Schedule D - Income - Gifts - schedule attached

☐ Schedule B - Real Property - schedule attached

☐ Schedule E - Income - Gifts - Travel Payments - schedule attached

-or-

☐ None - No reportable interests on any schedule

5. Verification

I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date Signed

3/20/13
(month, day, year)

Tiburon Town Councilmember
ALICE FREDERICKS

LIST OF BOARDS & COMMISSIONS for Form 700 – Annual Filing, year-end 2012 & 2013

- Town of Tiburon Council expanded statement
- Transportation Authority of Marin (TAM) – Current Chair and Town Delegate to Board of Directors, as well as TAM's representative to Marin County Council of Mayors & Councilmembers (MCCMC)
- Golden Gate Bridge Highway & Transportation District Director (appointed by MCCMC and ratified by Marin County Board of Supervisors)
- ABAG Regional Airport Planning Committee – at large appointee by MTC representing Marin County
- Citizen's Advisory Committee of the Water Emergency Transit Authority (alternate)
- League of CA Cities (Member of the Executive Committee, North Bay Division)
- League of CA Cities Policy Committees (Transportation, Communication & Public Works)
- MCCMC Legislative Committee (current Chair)

SCHEDULE A-1

Investments

Stocks, Bonds, and Other Interests

(Ownership Interest is Less Than 10%)

Do not attach brokerage or financial statements.

CALIFORNIA FORM **700**

FAIR POLITICAL PRACTICES COMMISSION

Name _____

► NAME OF BUSINESS ENTITY
AES

GENERAL DESCRIPTION OF BUSINESS ACTIVITY
solar and clean energy sources

FAIR MARKET VALUE
☒ \$2,000 - \$10,000 ☐ \$10,001 - \$100,000
☐ \$100,001 - \$1,000,000 ☐ Over \$1,000,000

NATURE OF INVESTMENT
☒ Stock ☐ Other _____ (Describe)
☐ Partnership ☐ Income Received of \$0 - \$499
 ☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:
6 / 28 / 12 ____ / ____ / 12
 ACQUIRED DISPOSED

► NAME OF BUSINESS ENTITY
IBM

GENERAL DESCRIPTION OF BUSINESS ACTIVITY
software, networking computers

FAIR MARKET VALUE
☐ \$2,000 - \$10,000 ☐ \$10,001 - \$100,000
☒ \$100,001 - \$1,000,000 ☐ Over \$1,000,000

NATURE OF INVESTMENT
☒ Stock ☐ Other _____ (Describe)
☐ Partnership ☐ Income Received of \$0 - \$499
 ☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:
6 / 28 / 12 ____ / ____ / 12
 ACQUIRED DISPOSED

► NAME OF BUSINESS ENTITY
Apple

GENERAL DESCRIPTION OF BUSINESS ACTIVITY
computers and communication

FAIR MARKET VALUE
☐ \$2,000 - \$10,000 ☒ \$10,001 - \$100,000
☐ \$100,001 - \$1,000,000 ☐ Over \$1,000,000

NATURE OF INVESTMENT
☒ Stock ☐ Other _____ (Describe)
☐ Partnership ☐ Income Received of \$0 - \$499
 ☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:
6 / 28 / 12 ____ / ____ / 12
 ACQUIRED DISPOSED

► NAME OF BUSINESS ENTITY
Mattel

GENERAL DESCRIPTION OF BUSINESS ACTIVITY
toys software

FAIR MARKET VALUE
☐ \$2,000 - \$10,000 ☒ \$10,001 - \$100,000
☐ \$100,001 - \$1,000,000 ☐ Over \$1,000,000

NATURE OF INVESTMENT
☒ Stock ☐ Other _____ (Describe)
☐ Partnership ☐ Income Received of \$0 - \$499
 ☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:
 ____ / ____ / 12 ____ / ____ / 12
 ACQUIRED DISPOSED

► NAME OF BUSINESS ENTITY
Bank of Marin

GENERAL DESCRIPTION OF BUSINESS ACTIVITY
banking

FAIR MARKET VALUE
☐ \$2,000 - \$10,000 ☒ \$10,001 - \$100,000
☐ \$100,001 - \$1,000,000 ☐ Over \$1,000,000

NATURE OF INVESTMENT
☒ Stock ☐ Other _____ (Describe)
☐ Partnership ☐ Income Received of \$0 - \$499
 ☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:
 ____ / ____ / 12 ____ / ____ / 12
 ACQUIRED DISPOSED

► NAME OF BUSINESS ENTITY
Merck

GENERAL DESCRIPTION OF BUSINESS ACTIVITY
pharmaceuticals

FAIR MARKET VALUE
☐ \$2,000 - \$10,000 ☒ \$10,001 - \$100,000
☐ \$100,001 - \$1,000,000 ☐ Over \$1,000,000

NATURE OF INVESTMENT
☒ Stock ☐ Other _____ (Describe)
☐ Partnership ☐ Income Received of \$0 - \$499
 ☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:
 ____ / ____ / 12 ____ / ____ / 12
 ACQUIRED DISPOSED

Comments: _____

SCHEDULE A-1**Investments****Stocks, Bonds, and Other Interests**

(Ownership Interest is Less Than 10%)

Do not attach brokerage or financial statements.

CALIFORNIA FORM 700

FAIR POLITICAL PRACTICES COMMISSION

Name _____

▶ NAME OF BUSINESS ENTITY

AT & T

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

telecommunications

FAIR MARKET VALUE

☐ \$2,000 - \$10,000☒ \$10,001 - \$100,000☐ \$100,001 - \$1,000,000☐ Over \$1,000,000

NATURE OF INVESTMENT

☒ Stock☐ Other _____

(Describe)

☐ Partnership☐ Income Received of \$0 - \$499☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:

____/____/12
ACQUIRED____/____/12
DISPOSED

▶ NAME OF BUSINESS ENTITY

Darden

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

restaurant

FAIR MARKET VALUE

☐ \$2,000 - \$10,000☒ \$10,001 - \$100,000☐ \$100,001 - \$1,000,000☐ Over \$1,000,000

NATURE OF INVESTMENT

☒ Stock☐ Other _____

(Describe)

☐ Partnership☐ Income Received of \$0 - \$499☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:

____/____/12
ACQUIRED____/____/12
DISPOSED

▶ NAME OF BUSINESS ENTITY

Alcatel

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

telecommunications

FAIR MARKET VALUE

☒ \$2,000 - \$10,000☐ \$10,001 - \$100,000☐ \$100,001 - \$1,000,000☐ Over \$1,000,000

NATURE OF INVESTMENT

☒ Stock☐ Other _____

(Describe)

☐ Partnership☐ Income Received of \$0 - \$499☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:

____/____/12
ACQUIRED____/____/12
DISPOSED

▶ NAME OF BUSINESS ENTITY

GE

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

power systems, appliances

FAIR MARKET VALUE

☐ \$2,000 - \$10,000☒ \$10,001 - \$100,000☐ \$100,001 - \$1,000,000☐ Over \$1,000,000

NATURE OF INVESTMENT

☒ Stock☐ Other _____

(Describe)

☐ Partnership☐ Income Received of \$0 - \$499☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:

____/____/12
ACQUIRED____/____/12
DISPOSED

▶ NAME OF BUSINESS ENTITY

Comcast

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

telecommunications

FAIR MARKET VALUE

☐ \$2,000 - \$10,000☒ \$10,001 - \$100,000☐ \$100,001 - \$1,000,000☐ Over \$1,000,000

NATURE OF INVESTMENT

☒ Stock☐ Other _____

(Describe)

☐ Partnership☐ Income Received of \$0 - \$499☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:

____/____/12
ACQUIRED____/____/12
DISPOSED

▶ NAME OF BUSINESS ENTITY

LSI

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

Software, semiconductors

FAIR MARKET VALUE

☐ \$2,000 - \$10,000☒ \$10,001 - \$100,000☐ \$100,001 - \$1,000,000☐ Over \$1,000,000

NATURE OF INVESTMENT

☒ Stock☐ Other _____

(Describe)

☐ Partnership☐ Income Received of \$0 - \$499☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:

____/____/12
ACQUIRED____/____/12
DISPOSED

Comments: _____

SCHEDULE A-1

Investments

Stocks, Bonds, and Other Interests
(Ownership Interest is Less Than 10%)

Do not attach brokerage or financial statements.

CALIFORNIA FORM **700**

FAIR POLITICAL PRACTICES COMMISSION

Name _____

► NAME OF BUSINESS ENTITY
Microsoft

GENERAL DESCRIPTION OF BUSINESS ACTIVITY
software, technology services

FAIR MARKET VALUE
☐ \$2,000 - \$10,000 ☒ \$10,001 - \$100,000
☐ \$100,001 - \$1,000,000 ☐ Over \$1,000,000

NATURE OF INVESTMENT
☒ Stock ☐ Other _____ (Describe)
☐ Partnership ☐ Income Received of \$0 - \$499
 ☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:
 _____/_____/12 _____/_____/12
 ACQUIRED DISPOSED

► NAME OF BUSINESS ENTITY
XXXX

GENERAL DESCRIPTION OF BUSINESS ACTIVITY
XXX

FAIR MARKET VALUE
☐ \$2,000 - \$10,000 ☐ \$10,001 - \$100,000
☐ \$100,001 - \$1,000,000 ☐ Over \$1,000,000

NATURE OF INVESTMENT
☐ Stock ☐ Other _____ (Describe)
☐ Partnership ☐ Income Received of \$0 - \$499
 ☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:
 _____/_____/12 _____/_____/12
 ACQUIRED DISPOSED

► NAME OF BUSINESS ENTITY
XXXX

GENERAL DESCRIPTION OF BUSINESS ACTIVITY
XXXX

FAIR MARKET VALUE
☐ \$2,000 - \$10,000 ☐ \$10,001 - \$100,000
☐ \$100,001 - \$1,000,000 ☐ Over \$1,000,000

NATURE OF INVESTMENT
☐ Stock ☐ Other _____ (Describe)
☐ Partnership ☐ Income Received of \$0 - \$499
 ☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:
 _____/_____/12 _____/_____/12
 ACQUIRED DISPOSED

► NAME OF BUSINESS ENTITY
XXXX

GENERAL DESCRIPTION OF BUSINESS ACTIVITY
XXXX

FAIR MARKET VALUE
☐ \$2,000 - \$10,000 ☐ \$10,001 - \$100,000
☐ \$100,001 - \$1,000,000 ☐ Over \$1,000,000

NATURE OF INVESTMENT
☒ Stock ☐ Other _____ (Describe)
☐ Partnership ☐ Income Received of \$0 - \$499
 ☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:
 _____/_____/12 _____/_____/12
 ACQUIRED DISPOSED

► NAME OF BUSINESS ENTITY
XXXX

GENERAL DESCRIPTION OF BUSINESS ACTIVITY
XXXX

FAIR MARKET VALUE
☐ \$2,000 - \$10,000 ☐ \$10,001 - \$100,000
☐ \$100,001 - \$1,000,000 ☐ Over \$1,000,000

NATURE OF INVESTMENT
☐ Stock ☐ Other _____ (Describe)
☐ Partnership ☐ Income Received of \$0 - \$499
 ☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:
 _____/_____/12 _____/_____/12
 ACQUIRED DISPOSED

► NAME OF BUSINESS ENTITY
XXXXX

GENERAL DESCRIPTION OF BUSINESS ACTIVITY
XX

FAIR MARKET VALUE
☐ \$2,000 - \$10,000 ☐ \$10,001 - \$100,000
☐ \$100,001 - \$1,000,000 ☐ Over \$1,000,000

NATURE OF INVESTMENT
☐ Stock ☐ Other _____ (Describe)
☐ Partnership ☐ Income Received of \$0 - \$499
 ☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:
 _____/_____/12 _____/_____/12
 ACQUIRED DISPOSED

Comments: _____

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION

Name _____
 Alice Fredericks _____

▶ 2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PERIOD

| | | |
|---|---|---------------------|
| NAME OF LENDER* | INTEREST RATE | TERM (Months/Years) |
| _____ | _____ % <input type="checkbox"/> None | _____ |
| ADDRESS (Business Address Acceptable) | | |
| _____ | | |
| BUSINESS ACTIVITY, IF ANY, OF LENDER | SECURITY FOR LOAN | |
| _____ | <input type="checkbox"/> None <input type="checkbox"/> Personal residence | |
| _____ | <input type="checkbox"/> Real Property _____ | |
| HIGHEST BALANCE DURING REPORTING PERIOD | | Street address |
| <input type="checkbox"/> \$500 - \$1,000 | | _____ |
| <input type="checkbox"/> \$1,001 - \$10,000 | | City |
| <input type="checkbox"/> \$10,001 - \$100,000 | <input type="checkbox"/> Guarantor _____ | |
| <input type="checkbox"/> OVER \$100,000 | <input type="checkbox"/> Other _____ | |
| | | (Describe) |

FPPC Form 700 (2012/2013) Sch. C
FPPC Advice Email: advice@fppc.ca.gov
FPPC Toll-Free Helpline: 866/275-3772 www.fppc.ca.gov

SCHEDULE C
Income, Loans, & Business
Positions
(Other than Gifts and Travel Payments)

| |
|---|
| CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION |
| Name Alice Fredericks |

► 1. INCOME RECEIVED

NAME OF SOURCE OF INCOME

Cooper and Scully

ADDRESS (Business Address Acceptable)

100 California St. #850

BUSINESS ACTIVITY, IF ANY, OF SOURCE

Law Firm

YOUR BUSINESS POSITION

Medical-Legal Consultant

GROSS INCOME RECEIVED

- ☐ \$500 - \$1,000 ☒ \$1,001 - \$10,000
☐ \$10,001 - \$100,000 ☐ OVER \$100,000

CONSIDERATION FOR WHICH INCOME WAS RECEIVED

- ☐ Salary ☐ Spouse's or registered domestic partner's income
☐ Loan repayment ☐ Partnership
☐ Sale of _____
(Real property, car, boat, etc.)
☐ Commission or ☐ Rental Income, list each source of \$10,000 or more

☐ Other consultant fee

(Describe)

► 1. INCOME RECEIVED

NAME OF SOURCE OF INCOME

District Attorney, Del Norte

ADDRESS (Business Address Acceptable)

450 H St, Crescent City, CA 95531

BUSINESS ACTIVITY, IF ANY, OF SOURCE

Law Firm

YOUR BUSINESS POSITION

Medical-Legal Consultant

GROSS INCOME RECEIVED

- ☐ \$500 - \$1,000 ☒ \$1,001 - \$10,000
☐ \$10,001 - \$100,000 ☐ OVER \$100,000

CONSIDERATION FOR WHICH INCOME WAS RECEIVED

- ☐ Salary ☐ Spouse's or registered domestic partner's income
☐ Loan repayment ☐ Partnership
☐ Sale of _____
(Real property, car, boat, etc.)
☐ Commission or ☐ Rental Income, list each source of \$10,000 or more

☐ Other consultant fee

(Describe)

► 2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PERIOD

* You are not required to report loans from commercial lending institutions, or any indebtedness created as part of a retail installment or credit card transaction, made in the lender's regular course of business on terms available to members of the public without regard to your official status. Personal loans and loans received not in a lender's regular course of business must be disclosed as follows:

NAME OF LENDER*

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF LENDER

HIGHEST BALANCE DURING REPORTING PERIOD

- ☐ \$500 - \$1,000
☐ \$1,001 - \$10,000
☐ \$10,001 - \$100,000
☐ OVER \$100,000

INTEREST RATE

TERM (Months/Years)

_____% ☐ None

SECURITY FOR LOAN

☐ None ☐ Personal residence

☐ Real Property

Street address

City

☐ Guarantor

☐ Other

(Describe)

Comments:

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION

Alice Fredericks

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION

Name _____
 Alice Fredericks _____

▶ 2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PERIOD

| | |
|--|---|
| NAME OF LENDER* _____ ADDRESS (<i>Business Address Acceptable</i>) _____ BUSINESS ACTIVITY, IF ANY, OF LENDER _____ HIGHEST BALANCE DURING REPORTING PERIOD <input type="checkbox"/> \$500 - \$1,000 <input type="checkbox"/> \$1,001 - \$10,000 <input type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> OVER \$100,000 | INTEREST RATE _____ % <input type="checkbox"/> None _____ SECURITY FOR LOAN <input type="checkbox"/> None <input type="checkbox"/> Personal residence <input type="checkbox"/> Real Property _____ <i>Street address</i> _____ <i>City</i> <input type="checkbox"/> Guarantor _____ <input type="checkbox"/> Other _____ <i>(Describe)</i> |
|--|---|

FPPC Form 700 (2012/2013) Sch. C
FPPC Advice Email: advice@fppc.ca.gov
FPPC Toll-Free Helpline: 866/275-3772 www.fppc.ca.gov

SCHEDULE C
Income, Loans, & Business
Positions
(Other than Gifts and Travel Payments)

| |
|---|
| CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION |
| Name Alice Fredericks |

► **1. INCOME RECEIVED**

NAME OF SOURCE OF INCOME
Scott D. Righthand

ADDRESS (Business Address Acceptable)
425 California St., 18th Fl. SF 94104

BUSINESS ACTIVITY, IF ANY, OF SOURCE
Law Firm

YOUR BUSINESS POSITION
Medical-Legal Consultant

GROSS INCOME RECEIVED
☐ \$500 - \$1,000 ☒ \$1,001 - \$10,000
☐ \$10,001 - \$100,000 ☐ OVER \$100,000

CONSIDERATION FOR WHICH INCOME WAS RECEIVED
☐ Salary ☐ Spouse's or registered domestic partner's income
☐ Loan repayment ☐ Partnership
☐ Sale of _____
(Real property, car, boat, etc.)
☐ Commission or ☐ Rental Income, list each source of \$10,000 or more

☐ Other consultant fee
(Describe)

► **1. INCOME RECEIVED**

NAME OF SOURCE OF INCOME
Walkup Melodia Kelly and Schoeberger

ADDRESS (Business Address Acceptable)
650 California St., 26th Fl. SF 94108

BUSINESS ACTIVITY, IF ANY, OF SOURCE
Law Firm

YOUR BUSINESS POSITION
Medical-Legal Consultant

GROSS INCOME RECEIVED
☐ \$500 - \$1,000 ☒ \$1,001 - \$10,000
☐ \$10,001 - \$100,000 ☐ OVER \$100,000

CONSIDERATION FOR WHICH INCOME WAS RECEIVED
☐ Salary ☐ Spouse's or registered domestic partner's income
☐ Loan repayment ☐ Partnership
☐ Sale of _____
(Real property, car, boat, etc.)
☐ Commission or ☐ Rental Income, list each source of \$10,000 or more

☐ Other consultant fee
(Describe)

► **2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PERIOD**

* You are not required to report loans from commercial lending institutions, or any indebtedness created as part of a retail installment or credit card transaction, made in the lender's regular course of business on terms available to members of the public without regard to your official status. Personal loans and loans received not in a lender's regular course of business must be disclosed as follows:

NAME OF LENDER* _____

ADDRESS (Business Address Acceptable) _____

BUSINESS ACTIVITY, IF ANY, OF LENDER _____

HIGHEST BALANCE DURING REPORTING PERIOD
☐ \$500 - \$1,000
☐ \$1,001 - \$10,000
☐ \$10,001 - \$100,000
☐ OVER \$100,000

INTEREST RATE _____% ☐ None

TERM (Months/Years) _____

SECURITY FOR LOAN
☐ None ☐ Personal residence
☐ Real Property _____
Street address _____
City _____
☐ Guarantor _____
☐ Other _____
(Describe)

Comments: _____

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION

Name _____
 Alice Fredericks _____

▶ 2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PERIOD

| | | |
|---|---|---------------------|
| NAME OF LENDER* | INTEREST RATE | TERM (Months/Years) |
| _____ | _____ % <input type="checkbox"/> None | _____ |
| ADDRESS (Business Address Acceptable) | | |
| _____ | | |
| BUSINESS ACTIVITY, IF ANY, OF LENDER | SECURITY FOR LOAN | |
| _____ | <input type="checkbox"/> None <input type="checkbox"/> Personal residence | |
| | <input type="checkbox"/> Real Property _____ | |
| | | Street address |
| HIGHEST BALANCE DURING REPORTING PERIOD | | |
| <input type="checkbox"/> \$500 - \$1,000 | | |
| <input type="checkbox"/> \$1,001 - \$10,000 | | |
| <input type="checkbox"/> \$10,001 - \$100,000 | <input type="checkbox"/> Guarantor _____ | |
| <input type="checkbox"/> OVER \$100,000 | <input type="checkbox"/> Other _____ | |
| | | (Describe) |

FPPC Form 700 (2012/2013) Sch. C
FPPC Advice Email: advice@fppc.ca.gov
FPPC Toll-Free Helpline: 866/275-3772 www.fppc.ca.gov

SCHEDULE D Income – Gifts

| |
|---|
| CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION Name _____ |
|---|

► NAME OF SOURCE (Not an Acronym)
Institute for Local Government

ADDRESS (Business Address Acceptable)
1400 K St, Ste 205, Sacramento CA 95814

BUSINESS ACTIVITY, IF ANY, OF SOURCE
Public Policy Education, Board Meetings

| DATE (mm/dd/yy) | VALUE | DESCRIPTION OF GIFT(S) |
|--------------------|----------|------------------------|
| 02 / 24 / 12 | \$ 12 | food at Board meeting |
| 05 / 25 / 12 | \$ 12 | food at Board meeting |
| ____ / ____ / ____ | \$ _____ | _____ |

► NAME OF SOURCE (Not an Acronym)
League of CA Cities TCPW Policy Committee

ADDRESS (Business Address Acceptable)
1400 K St, Sacramento, CA 95814

BUSINESS ACTIVITY, IF ANY, OF SOURCE
Legislative Advocacy, Policy Committee Meetings

| DATE (mm/dd/yy) | VALUE | DESCRIPTION OF GIFT(S) |
|--------------------|----------|------------------------|
| 01 / 19 / 12 | \$ 38 | Food |
| 06 / 14 / 12 | \$ 33 | Food |
| ____ / ____ / ____ | \$ _____ | _____ |

► NAME OF SOURCE (Not an Acronym)
League of CA Cities

ADDRESS (Business Address Acceptable)
1400 K St, Sacramento, CA 95814

BUSINESS ACTIVITY, IF ANY, OF SOURCE
Legislative Advocacy, Board Meetings

| DATE (mm/dd/yy) | VALUE | DESCRIPTION OF GIFT(S) |
|-----------------|--------|------------------------|
| 04 / 26 / 13 | \$ 89 | Food |
| 07 / 19 / 12 | \$ 194 | Food |
| 07 / 20 / 12 | \$ 94 | Food |

► NAME OF SOURCE (Not an Acronym)
League of CA Cities

ADDRESS (Business Address Acceptable)
1400 K St. Sacramento, CA 95814

BUSINESS ACTIVITY, IF ANY, OF SOURCE
Legislative Advocacy, Board meeting

| DATE (mm/dd/yy) | VALUE | DESCRIPTION OF GIFT(S) |
|--------------------|----------|------------------------|
| 09 / 06 / 12 | \$ 73 | Food |
| ____ / ____ / ____ | \$ _____ | _____ |
| ____ / ____ / ____ | \$ _____ | _____ |

► NAME OF SOURCE (Not an Acronym)

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

| DATE (mm/dd/yy) | VALUE | DESCRIPTION OF GIFT(S) |
|--------------------|----------|------------------------|
| ____ / ____ / ____ | \$ _____ | _____ |
| ____ / ____ / ____ | \$ _____ | _____ |
| ____ / ____ / ____ | \$ _____ | _____ |

► NAME OF SOURCE (Not an Acronym)

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

| DATE (mm/dd/yy) | VALUE | DESCRIPTION OF GIFT(S) |
|--------------------|----------|------------------------|
| ____ / ____ / ____ | \$ _____ | _____ |
| ____ / ____ / ____ | \$ _____ | _____ |
| ____ / ____ / ____ | \$ _____ | _____ |

Comments: _____